resolution (H. Res. 235) providing for consideration of the bill (H.R. 1262) to amend the Federal Water Pollution Control Act to authorize appropriations for State water pollution control revolving funds, and for other purposes, which was referred to the House Calendar and ordered to be printed.

CONTINUATION OF THE NATIONAL EMERGENCY WITH RESPECT TO IRAN—MESSAGE FROM THE PRESIDENT OF THE UNITED STATES (H. DOC. NO. 111–24)

The SPEAKER pro tempore laid before the House the following message from the President of the United States; which was read and, together with the accompanying papers, without objection, referred to the Committee on Foreign Affairs and ordered to be printed:

To the Congress of the United States:

Section 202(d) of the National Emergencies Act (50 U.S.C. 1622(d)) provides for the automatic termination of a national emergency unless, prior to the anniversary date of its declaration, the President publishes in the Federal Register and transmits to the Congress a notice stating that the emergency is to continue in effect beyond the anniversary date. In accordance with this provision, I have sent the enclosed notice to the Federal Register for publication, stating that the Iran emergency declared on March 15, 1995, is to continue in effect beyond March 15, 2009.

The crisis between the United States and Iran resulting from the actions and policies of the Government of Iran that led to the declaration of a national emergency on March 15, 1995, has not been resolved. The actions and policies of the Government of Iran are contrary to the interests of the United States in the region and pose a continuing unusual and extraordinary threat to the national security, foreign policy, and economy of the United States. For these reasons, I have determined that it is necessary to continue the national emergency declared with respect to Iran and maintain in force comprehensive sanctions against Iran to respond to this threat.

BARACK OBAMA.

THE WHITE HOUSE, *March 11, 2009.*

□ 1730

STEM CELL RESEARCH

The SPEAKER pro tempore (Ms. FUDGE). Under the Speaker's announced policy of January 6, 2009, the gentleman from New Jersey (Mr. SMITH) is recognized for 60 minutes.

Mr. SMITH of New Jersey. I am very grateful to be here for this hour. And I hope some of my colleagues will join me on a very important discussion about embryonic stem cell research and the huge alternative—''the'' alternative—adult stem cells, that have proven beyond any reasonable doubt that it is not only ethical, but it works.

Madam Speaker, at a time when highly significant—even historic—breakthroughs in adult stem cell research have become almost daily occurrences, and almost to the point of being mundane, President Obama has chosen to turn back the clock and, beginning just 3 days ago, will force taxpayers to subsidize the unethical over the ethical, the unworkable over what works, and hype and hyperbole over hope.

Human embryo destroying stem cell research is not only unethical, unworkable, and unreliable, it is now demonstrably unnecessary. Assertions that leftover embryos are better off dead so that their stem cells can be derived is dehumanizing, and it cheapens human life.

There is no such thing as a leftover human life. Ask the snowflake children, Madam Speaker, ask their parents. Snowflake children are those cryogenically frozen embryos who were adopted while still frozen. This past Monday, I had the privilege of being with several of those children. They look just like any other kid, any other child. And those kids could have been subjected to embryo-destroying research or they could have been poured down the drain. But thankfully, the donors, the biological parents, decided that they are better off alive and flourishing. And these kids, like so many of the other snowflake children that I have met in the past, were just like any other child.

Life is a continuum, Madam Speaker. It does not begin at the moment of birth. It starts at the moment of fertilization and continues unabated, unless interfered with, until natural death. Birth is an event that happens to your life and to mine, it is not the beginning of life.

Madam Speaker, a recent spectacular breakthrough in the noncontroversial adult stem cell research and clinical applications to effectuate cures or the mitigation of disease or disability have been well documented. For several years, significant progress has been achieved with adult stem cells derived from nonembryonic sources, including umbilical cord blood, bone marrow, brain, amniotic fluid, skin, and even fat cells. Patients with a myriad of diseases, including leukemia, type 1 diabetes, multiple sclerosis, lupus, sickle cell anemia, and dozens of other diseases have significantly benefited from adult stem cell transfers.

In 2005, Madam Speaker, I wrote a law, the Stem Cell Research and Transplantation Act of 2005. It was legislation that created a national program of bone marrow and cord blood, umbilical cord blood—or that blood that is found in the placenta—that is teeming with stem cells of high value that can be coaxed into becoming pluripotent, capable of becoming anything in the human body.

We know for a fact that cord blood stem cells can mitigate, and in some cases even cure—and there have been several—those suffering from sickle cell anemia. One out of every 500 African Americans, unfortunately, have sickle cell anemia. And cord blood transfers have the capacity and the capability to effectuate cures or the mitigation of that disease. And we have several examples.

I remember when the bill was stuck—first here, and then on the Senate side. We were able to bring people, including Dr. Julius Erving, to a press conference to appeal to the House and Senate leadership to bring that legislation forward simply because it would save lives, but it was being held hostage by the hype and the hyperbole of embryonic stem cell research, which has not cured anyone. The legislation passed the House. Finally, it was dislodged from the Senate and became law. And now we have a nationwide network overseen by HRSA, under the Department of Health and Human Services, to grow our capacity—the number of specimens of cord blood stem cells—to type it, freeze it, use best practices, and promote cures.

Now, the greatest of all breakthroughs—the greatest, in my opinion, and in the opinion of many eminent scientists—is what is known as induced pluripotent stem cells. And I say to my colleagues, and I say to anyone who may be listening on C–SPAN, iPS cells, induced pluripotent stem cells, are the future and the greatest hope for cures. They are embryo-like, but they are not embryos. There is no killing of an embryo to derive the stem cells.

On November 20, 2007, Japanese scientist, Dr. Shinya Yamanaka, and Wisconsin researcher, Dr. James Thomson, shocked the scientific community by independently announcing their ability to derive induced pluripotent stem cells by reprogramming regular skin cells. And unlike embryonic stem cells that kill the donor, are highly unstable, have a propensity to morph into tumors, and are likely to be rejected by the patient unless strong antirejection medicines are administered, induced pluripotent stem cells, iPS cells, have none of those deficiencies, and again, are emerging as the future, the greatest hope of regenerative medicine.

Mr. Obama is way behind the times. Making Americans pay for embryo-destroying stem cell research is not change we can believe in—far from it—it is politics.

A decade ago, the false hope of embryo-destroying research made it difficult to oppose, no doubt. There was a lot of hype, a lot of hot air—much of it well meaning, perhaps—but it was very misleading. That is no longer the case. So the question arises; why persist in the dehumanizing of nascent human life when better alternatives exist, alternatives that work on both ethics grounds and efficacy grounds? Nonembryonic stem cell research is the present and it is the future of regenerative medicine, and the only responsible way forward.